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FORM LM-30 **LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11-30-2006

This report is mandatory under P L. 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U Q G Q	2 Fiscal Year Covered From		
	1 / 1 / 2004 Through 12 / 31 / 2004		
3 Name and address of person filing	4 Name file number and address of labor organization		
Name James E Crabb	Name IN/KY Regional Council of Carpenters		
	Labor Organization File Number 060-114		
PO Box Bidg Room No fany	PO Box Building and Room Number if any		
Street R A Box 722G	Street 2635 Madison Ave		
Caty Bloomfield	City Indianapolis		
State Indiana ZIP Code + 4 47424	State Indiana ZIP Code + 4 46225		
5 Position in labor organization Senior Representative			
Enter appropriate data below if during the past fiscal year you or your spo (except as specified in the exch A Held an interest in engaged in transactions (including loans) with or	usions set forth in the instructions)		
monetary value from an employer whose employees your organization	ion represents or is actively seeking to represent		
6 Name and address of Employer (including trade name if any)	7.a Nature of Interest, Transaction or Income		
Name			
Trade Name If any			
PO Box, Bldg Room No If any			
Street	7 b Amount		
	<u></u>		
City			
State ZIP Code + 4			
Sign	nature		
15 Signature and ventication. The undersigned declares under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief true correct, and complete (See the see	ving documents) has been examined by the signatory and is to the best of the		
Signed James & brakt	On 08/09/2005 (812)825-2598		
Form LM-30 (2003)	Date Telephone Number		

Name of Person Filing James Crabb	File Number U	
B Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from selling or leasing to or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business bely seeking to represent or irectly to or otherwise	
8 Name and address of Business (including trade name if any) Name Ind Regional Council of Carpenters JATF Trade Name frany Carp/Mill Training Program PO Box Bldg Room No frany Street 6125 E 38th St City Indianapolis State Indiana ZIP Code + 4 46226-5603	9 Business deals with a Labor Organization b Trust c Employer	
10 if 9 b or 9 c is checked give trust or employer's name Name Trade Name if any PO Box Bldg Room No if any Street City ZIP Code + 4	Provide Training 11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received Apprenticeship Banquets	
	12 b Amount	\$112
C Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Trade Name if any PO Box Bidg Room No if any Street City ZIP Code + 4	14 a Nature of payment	
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment.	

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Name of Person Filing James	Crabb	File Number U	

Part B Continuation Page

8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Nottinghill Ivestment Advisers	a Labor Organization	
Trade Name if any	▼ b Trust	
PO Box Bldg Room No if any Southampton Square		
Street 7414 Jager Ct	c Employer	
Cincinnati		
State Ohio ZIP Code + 4 45230 4349		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pension	Provide Pension	
T-de Nerre if any		:
Trade Name if any		
PO Box Bidg Room No if any PO Box 421729		
Street		
Caty Indianapolis		
Indianaporis		
State Indiana ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	<u> </u>
	12 a Nature of interest held or income received	
	Discuss Investments	
	12 b Amount	\$74

Name of Person Filing James Crabb

		
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Buckhead Capital Management	a Labor Organization	
Trade Name if any		
PO Box Bldg Room No fany Peachtree Pointe Suite 500	b Trust	
Street 1545 Peachtree St N E	C Employer	
City Atlanta		
State Georgia ZIP Code + 4 30309		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pension	Provide Pension	j
Trade Name if any		
PO Box Bidg Room No if any PO Box 421729		
Street Street	[[
Street		
City Indianapolis		
State Indiana ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	
	12 a Nature of interest held or income received	
	Discuss Ivestments]
	12 b Amount	\$53

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Name of Person Filing James	Crabb	File Number U	

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8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Invesco Capital Management	a Labor Organization	
Trade Name if any	∑ b Trust	
PO Box Bidg Room No fany	b Trust	
Street 1360 Peachtree St N E Suite 100	c Employer	
City Atlanta		
State Georgia ZIP Code + 4 30309		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pension	Provide Pension	
Indiana Carpencers Fension		
Trade Name if any		
	<u> </u>	
PO Box Bidg Room No if any PO Box 421729		
Street		
City Indianapolis		
State Indiana ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	
	12 a Nature of interest held or income received	
	Discuss Investments	
	12 b Amount	\$64

Name of Person Filing James	Crabb	File Number U

	9 Business deals with	
8 Name and address of Business (including trade name if any)		
Name Ark Asset Management	a Labor Organization	
Trade Name if any		
	▼ b Trust	
PO Box Bidg Room No if any 13th Floor		
Street 125 Broad Street	c Employer	
City New York		
State New York ZIP Code + 4 10004		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pension	Provide Pension	
Trade Name if any		
PO Box Bidg Room No if any PO Box 421729		
Street		
City Indianapolis		
State Indiana ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	
	12 a Nature of interest held or income received	
	Discuss Investments	
	12 b Amount	\$72

Name of Person Filing James	Crabb		File Number U	
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8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Baird Investment Management	a Labor Organization	
Trade Name if any		
PO Box Bldg Room No If any	b Trust	
Street 10 West Broad Street Suite 2500	c Employer	
City Columbus		
State Oh10 ZIP Code + 4 43215		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pension	Provide Pension	
Trade Name If any		
PO Box Bidg Room No if any PO Box 421729		
Street		
Chy Indianapolis		
State Indiana ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	
	12 a Nature of interest held or income received	· · · · · · · · · · · · · · · · · · ·
	Discuss Investments	
		1
	12 b Amount	\$68

Name of Person Filing James	Crabb	File Number U
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (include	ding trade name if any)	9 Business deals with	
Name Indiana Carpenters Pen	sion	a Labor Organization	
Trade Name If any			
PO Box Bidg Room No if any PO	Box 421729	b Trust	
Street		c Employer	
Caty Indianapolis			
State Indiana	ZIP Code + 4 46242-1789		
10 if 9 b or 9 c is checked give trust or em	ployer's name	11 a Nature of such dealing	
Name Indiana Carpenters Pen	sion	Provide Pension	
Trade Name of any			
PO Box Bidg. Room No if any PO	Вох 421729		
Street			
City Indianapolis			
State Indiana	ZIP Code + 4 46242-1789	11 b Approximate dollar value of such dealing	
		12 a Nature of interest held or income received	
		Reimbursement of expenses as a tru	
		to the International Foundation of Plans as per the DOL and ARISA rec	
		-	
}		12 h Amount	\$2.949

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